Attorney's Docket No.: 04373-033001



## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>REMOTE INSPECTION OF EMERGENCY EQUIPMENT STATIONS</u>, the specification of which:

[]	is attached hereto.	
[X]	was filed on July 8, 2003 as Application Serial No. 10/614,948.	
[]	was described and claimed in PCT International Application No.	filed on
	and as amended under PCT Article 19 on	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Timothy A. French, Reg. No. 30,175 David L. Feigenbaum, Reg. No. 30,378 Jeffrey J. Barclay, Reg. No. 48,950 William E. Booth, Reg. No. 28,933 John F. Hayden, Reg. No. 37,640

Direct all telephone calls to TIMOTHY A. FRENCH at telephone number (617) 542-5070.

Direct all correspondence to the following:

## 26161 PTO Customer Number

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

## **Combined Declaration and Power of Attorney**

Page 2 of 2 Pages

Г	uII	Name	Οī	inventor:	

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

M Cushing Street Hingham, MA 02043

Full Name of Inventor:

JOHN J. MCSHEFFREY,

Inventor's Signature:

Date:

Residence Address:

3 Molmes Street Needham, MA 02492

United States

Citizenship: Post Office Address:

3 Holmes Street

Needham, MA 02492

Full Name of Inventor:

**BRENDAN T. MCSHEFFREY** 

Inventor's Signature:

Residence Address:

Newton, MA 02459

Citizenship:

United States

Post Office Address:

34 Morton Road

Newton, MA 02459

20732632.doc